

PETITION of CANDIDACY

For _____
(Please **print name** of candidate.)

FOR THE OFFICE OF _____

This petition must be filed in the office of the appropriate political sub-division filing office on or before 5 p.m. on the last day of filing for the _____ Election. The submitted petition must have affixed thereto the names of at least five (5) qualified electors which reside within the appropriate district or zone.

I, the undersigned, being a qualified elector of the _____ zone/district, in the State of Idaho, do hereby certify and declare that I reside at the place set opposite my name, and that I join in the petition of _____, a candidate for the office of _____, to be voted for at the election to be held on the _____ day of _____, _____.

	Signature of Petitioner	Printed Name	Residence Address	Date Signed
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____
7	_____	_____	_____	_____
8	_____	_____	_____	_____
9	_____	_____	_____	_____
10	_____	_____	_____	_____

STATE OF IDAHO

ss.

County of _____

I, _____, being first duly sworn, say: That I am a resident of the State of Idaho and at least eighteen (18) years of age; that every person who signed this sheet of the foregoing petition signed his or her name thereto in my presence; I believe that each has stated his or her name and residence address correctly, that each signer is a qualified elector of the State of Idaho, and a resident of the county of _____.

Signed _____

Mailing Address _____

Subscribed and sworn to before me this _____ day of _____, _____.

(Notary Seal)

Signed _____

Notary Public Residing at _____